

Charter Number Only

4-10-94
P9700003978/

Fredrick Goldstein

Regulator's Name

1132 SE 3rd AVE.

Address

H. Lauderdale, FL 33316

City

State

Zip

Phone

(954) 832-7667

ION ONLY

400002141744--S
-04/14/97--01007--026
****122.50 ****122.50

CORPORATION(S) NAME

Integrated Laboratory Services, Inc.



Empire Toll Free: 1-800-432-3028

97 MAY -5 PM 1:52
TOLL FREE

☒ Profit

☐ NonProfit

☐ Amendment

☐ Merger

☐ Foreign

☐ Dissolution

☐ Mark

☐ Limited Partnership

☐ Annual Report

☐ Other

☐ Reinstatement

☐ Reservation

☐ Change of Registered Agent

☒ Certified Copy

☐ Photo Copies

☐ Certificate Under Seal

☐ Call When Ready

☐ Call If Problem

☐ After 4:30

☒ Walk In

☐ Will Wait

☒ Pick Up

☐ Mail Out

Name	
Availability	
Document	
Examiner	
Updater	
Verifier	
Acknowledgment	
W.P. Verifier	

CERTIFIED COPY



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

RECEIVED
97 MAY -5 AM 10:26
DIVISION OF CORPORATION

April 14, 1997

EMPIRE

TALLAHASSEE, FL

SUBJECT: INTEGRATED LABORATORY SERVICES, INC.
Ref. Number: W97000008548

We have received your document for INTEGRATED LABORATORY SERVICES, INC. and check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The entity name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved entity. Names of administratively dissolved entities are not available for one year from the date of administrative dissolution unless the dissolved entity provides the Department of State with a notarized affidavit executed as required by section 607.0120, 617.01201, 608.5135 or 608.4482 Florida Statutes, permitting the immediate assumption or use of the name by another entity.

Simply adding "of Florida" or "Florida" to the end of a name does not constitute a difference.

When the document is resubmitted, please return a copy of this letter to ensure proper handling.

If you have any questions about the availability of a particular name, please call (904) 488-9000.

If you have any questions concerning the filing of your document, please call (904) 487-6934.

Loria Poole
Corporate Specialist

Letter Number: 997A00018578

**ARTICLES OF INCORPORATION
OF
GRAHAM LABORATORY SERVICES, INC.**

WE THE UNDERSIGNED, desiring to associate ourselves together for the purpose of forming a stock corporation, under the laws of the State of Florida, and pursuant to the provisions of the statutes of the State of Florida, providing for the information, liabilities, rights and privileges and immunities of a corporation for profit, DO HEREBY as follows:

ARTICLE I

The name of this corporation shall be **GRAHAM LABORATORY SERVICES, INC.**

ARTICLE II

GENERAL NATURE OF BUSINESS

The corporation may engage in any activity or business permitted under the laws of the United States and of the State of Florida.

ARTICLE III

COMMON SHARES

The amount of the authorized capital stock of the corporation shall be **One Hundred [100]** common shares at **One Dollar [\$1.00]** par value.

ARTICLE IV

AMOUNT OF CAPITAL TO BEGIN BUSINESS

The amount of capitol stock with which this corporation shall commence shall be **One Hundred Dollars [\$100.00]**.

ARTICLE V

CORPORATE EXISTENCE

This corporation shall have perpetual existence unless sooner dissolved according to law.

ARTICLE VI

PRINCIPLE PLACE OF BUSINESS

The initial street address of the principal place of business of this corporation shall be: 1872 N.E. 46th Street, D6, Fort Lauderdale, Florida 33308.

ARTICLE VII

NUMBER OF DIRECTORS

The number of directors of this corporation shall be at least **One** [1].

ARTICLE VIII

The names and post office addresses of the first Board of Directors of this corporation who will hold office for the first year, or until successors are elected and have qualified, shall be:

David J. Graham, 1872 N.E. 46th Street, D6, Fort Lauderdale, Florida 33308.

ARTICLE IX

OFFICERS

The names and post office addresses of the officers of this corporation who shall hold office for the first year or until their successors are elected or appointed and have qualified are:

President, Vice-President, Secretary & Treasurer

David Graham, 1872 N.E. 46th Street, D6, Fort Lauderdale, Florida 33308.

ARTICLE X

REGISTERED AGENT

The office located at 1872 N.E. 46th Street, D6, Fort Lauderdale, Florida 33308, is hereby designated as the registered office of this corporation and David Graham of said address is hereby designated as registered agent of said corporation.

ARTICLE XI

INCORPORATOR

The names and post office addresses of each incorporator and number of shares of stock which each agrees to take are:

David J. Graham	
1872 N.E. 46th Street D6	
Fort Lauderdale, Florida 33308	100 shares

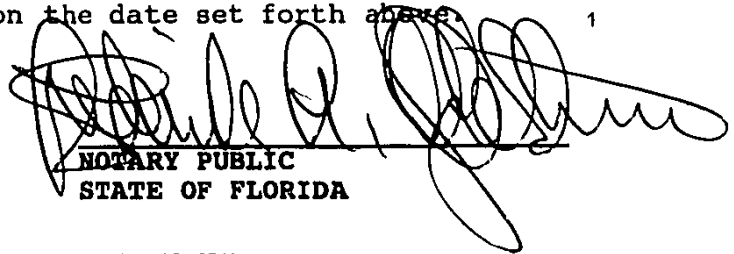

DAVID GRAHAM

STATE OF FLORIDA

COUNTY OF BROWARD

BEFORE ME, the undersigned authority, this 21st day of April, 1997, personally appeared DAVID J. GRAHAM, personally known to me _____; or produced identification [type of identification produced] _____, and who did take an oath or did not take an oath, and who executed and subscribed to the same for the purposes therein expressed.

IN WITNESS WHEREOF, I have hereunto set my hand and official seal in said County and State on the date set forth above.


NOTARY PUBLIC
STATE OF FLORIDA

MY COMMISSION EXPIRES:



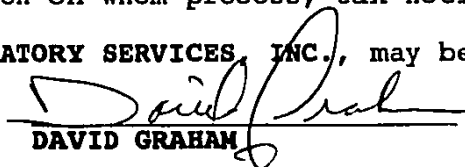
FREDERICK A. GOLDSTEIN
My Commission CC328313
Expires Oct. 25, 1997
Bonded by HAI
800-422-1555

ORIGINAL APPOINTMENT OF AGENT UPON WHOM

PROCESS MAY BE SERVED

KNOW ALL MEN BY THESE PRESENTS:

THAT DAVID J. GRAHAM, in Broward County, a natural person and resident of the County, being the County in which the registered agent's office of David J. Graham, is located is hereby appointed as the person on whom process, tax notices and demands against GRAHAM LABORATORY SERVICES, INC., may be served.


DAVID GRAHAM

STATE OF FLORIDA

COUNTY OF BROWARD

Gentlemen:

I hereby accept the appointment as the representative of GRAHAM LABORATORY SERVICES, INC., upon process, tax notices and demands may be served.


DAVID GRAHAM

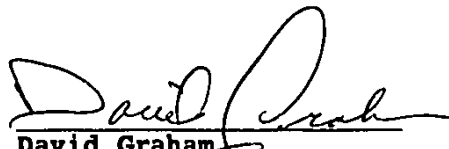
**CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of §607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation is: **GRAHAM LABORATORY SERVICES, INC.**

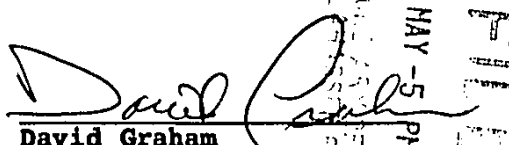
2. The name and address of the registered agent and office is:

David J. Graham
1872 N.E. 46th Street D6
Fort Lauderdale, Florida 33308


David Graham
Title: President

Date: 4/29/97

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.


David Graham
Date: 4/29/97

97 MAY -5 PM 1:52
FILED
STATE
FLORIDA

REGISTERED AGENT FILING FEE: \$35.00